

Fill in this information to identify the case:

United States Bankruptcy Court for the:
Eastern District of Wisconsin
(State)
Case number (if known): _____ Chapter 7

Check if this is an amended filing

Official Form 205

Involuntary Petition Against a Non-Individual

12/15

Use this form to begin a bankruptcy case against a non-individual you allege to be a debtor subject to an involuntary case. If you want to begin a case against an individual, use the *Involuntary Petition Against an Individual* (Official Form 105). Be as complete and accurate as possible. If more space is needed, attach any additional sheets to this form. On the top of any additional pages, write debtor's name and case number (if known).

Part 1: Identify the Chapter of the Bankruptcy Code Under Which Petition Is Filed

1. Chapter of the Bankruptcy Code

Check one:

- Chapter 7
 Chapter 11

Part 2: Identify the Debtor

2. Debtor's name

MM Mechanical, LLC

3. Other names you know the debtor has used in the last 8 years

Include any assumed names, trade names, or *doing business as* names.

4. Debtor's federal Employer Identification Number (EIN)

Unknown

8 5 0 5 5 6 7 9 8
EIN — — — — — — — — — —

5. Debtor's address

Principal place of business

4620 S. Taylor Drive

Number Street

Sheboygan

WI 53081

City

State

ZIP Code

Sheboygan

County

Mailing address, if different

Number Street

P.O. Box

City State ZIP Code

Location of principal assets, if different from principal place of business

Number Street

City State ZIP Code

Debtor

MM Mechanical, LLC

Name

Case number (if known) _____

6. Debtor's website (URL)

<https://mmmechanicalllc.com/>

7. Type of debtor

- Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
 Partnership (excluding LLP)
 Other type of debtor. Specify: _____

8. Type of debtor's business

Check one:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
 Railroad (as defined in 11 U.S.C. § 101(44))
 Stockbroker (as defined in 11 U.S.C. § 101(53A))
 Commodity Broker (as defined in 11 U.S.C. § 101(6))
 Clearing Bank (as defined in 11 U.S.C. § 781(3))
 None of the types of business listed.
 Unknown type of business.

9. To the best of your knowledge, are any bankruptcy cases pending by or against any partner or affiliate of this debtor?

- No

Yes. Debtor _____ Relationship _____

District _____ Date filed _____ Case number, if known _____
 MM / DD / YYYY

Debtor _____ Relationship _____

District _____ Date filed _____ Case number, if known _____
 MM / DD / YYYY

Part 3: Report About the Case

10. Venue

Check one:

- Over the last 180 days before the filing of this bankruptcy, the debtor had a domicile, principal place of business, or principal assets in this district longer than in any other district.
 A bankruptcy case concerning debtor's affiliates, general partner, or partnership is pending in this district.

11. Allegations

Each petitioner is eligible to file this petition under 11 U.S.C. § 303(b).

The debtor may be the subject of an involuntary case under 11 U.S.C. § 303(a).

At least one box must be checked:

- The debtor is generally not paying its debts as they become due, unless they are the subject of a bona fide dispute as to liability or amount.
 Within 120 days before the filing of this petition, a custodian, other than a trustee, receiver, or an agent appointed or authorized to take charge of less than substantially all of the property of the debtor for the purpose of enforcing a lien against such property, was appointed or took possession.

12. Has there been a transfer of any claim against the debtor by or to any petitioner?

- No

Yes. Attach all documents that evidence the transfer and any statements required under Bankruptcy Rule 1003(a).

Debtor **MM Mechanical, LLC**
Name _____

Case number (if known) _____

13. Each petitioner's claim	Name of petitioner	Nature of petitioner's claim	Amount of the claim above the value of any lien
	The Wisconsin Sheet Metal Health and Benefit Fund	ERISA Fringe Benefits	\$ 44,889.35
	Retirement Plan for Employees Represented by Sheet Metal Workers Local Union 18	ERISA Fringe Benefits	\$ 29,084.97
	Sheet Metal Workers Local #18 Training Fund	ERISA Fringe Benefits	\$ 2,483.01
Total of petitioners' claims			\$ 76,457.33

If more space is needed to list petitioners, attach additional sheets. Write the alleged debtor's name and the case number, if known, at the top of each sheet. Following the format of this form, set out the information required in Parts 3 and 4 of the form for each additional petitioning creditor, the petitioner's claim, the petitioner's representative, and the petitioner's attorney. Include the statement under penalty of perjury set out in Part 4 of the form, followed by each additional petitioner's (or representative's) signature, along with the signature of the petitioner's attorney.

Part 4: Request for Relief

WARNING – Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Petitioners request that an order for relief be entered against the debtor under the chapter of 11 U.S.C. specified in this petition. If a petitioning creditor is a corporation, attach the corporate ownership statement required by Bankruptcy Rule 1010(b). If any petitioner is a foreign representative appointed in a foreign proceeding, attach a certified copy of the order of the court granting recognition.

I have examined the information in this document and have a reasonable belief that the information is true and correct.

Petitioners or Petitioners' Representative

Name and mailing address of petitioner

The Wisconsin Sheet Metal Health and Benefit Fund

Name _____

2201 Springdale Road

Number Street

Waukesha WI 53186

City _____

State _____

ZIP Code _____

Name and mailing address of petitioner's representative, if any

Scott Knocke

Name _____

2201 Springdale Road

Number Street

Waukesha WI 53186

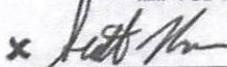
City _____

State _____

ZIP Code _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 06/28/2023
MM / DD / YYYY

 Co-Chair

Signature of petitioner or representative, including representative's title

Attorneys

Alex J. Sterling

Printed name _____

The Previant Law Firm, S.C.

Firm name, if any _____

310 West Wisconsin Avenue, Suite 100MW

Number Street

Milwaukee WI 53203

City _____

State _____

ZIP Code _____

Contact phone (414) 271-4500 Email ajs@previant.com

Bar number 1107931

State WI

 Signature of attorney

Date signed 06/30/2023
MM / DD / YYYY

Debtor

MM Mechanical, LLC

Name

Case number (if known)

Name and mailing address of petitioner
Retirement Plan for Employees Represented by
Sheet Metal Workers Local Union 18

Name

2201 Springdale Road

Number Street

Waukesha WI 53186
City State ZIP Code

Name and mailing address of petitioner's representative, if any

Scott Knocke

Name

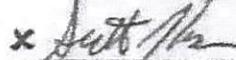
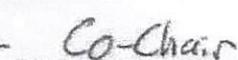
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Number Street

Waukesha WI 53186
City State ZIP Code

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Executed on 06/28/2023
MM / DD / YYYY

  Co-Chair

Signature of petitioner or representative, including representative's title

Name and mailing address of petitioner

Sheet Metal Workers Local #18 Training Fund

Name

2201 Springdale Road

Number Street

Waukesha WI 53186
City State ZIP Code

Name and mailing address of petitioner's representative, if any

Matthew Van Der Puy

Name

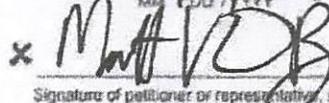
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Alex J. Sterling

Printed name

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Firm name, if any

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State WI

 Signature of attorney

Date signed

06/30/2023
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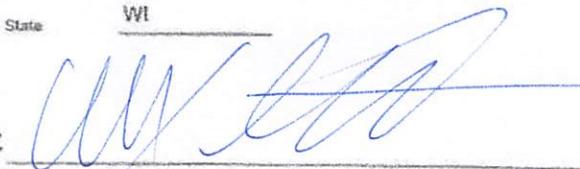
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Date signed

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